PTO/S8/06 (08-03)

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COSMIL Under the Paperwork Reduction Act of 1995, no persona are required to respond to a collection of information unteres & displays a valid Ontil control nu														F COMMERC
PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875												10/708 645		
CLAIMS AS FILED - PART I (Column 1) (Column 2)										SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
L	FOR	_ 1	NUM	BER FILED	MUMBER EXTRA			1	RATE	FEE	1	RATE	FEE	
33	SIC FEE OFR 1,16(4))						1		1.	GR.				
DOFA CLAMS			10 *******			7. \			1		-	1		 -
DEPENDENT CLASES			-			1			1	,	+	OR	×	
_	CFR 1.16(b))		O- 19673 3 .			·			1	×1	<u> </u>	OR	× 1	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))										٠٠	L	OR	٠٠٠	
* 8 the difference in column 1 is less than zero, unter "0" in column 2.										TOTAL		O.A	TOTAL	
		LAIMS	AS AL	IENDEC										
	13/39/a		umo 1)			Canuma 2)	(Cc	alumn 3)		SMALL	ENTITY	OR		R THAN ENTITY
AMENDMENT A		REA	AMS MAINING FTER VIDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR			ESENT		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ă	(IF CFA 1.4E/s)			Minus	_	20	- 4	1	ı	x 3 •		OR.	×	
Ä	Endependent SP CFR L MENS		ユ ー	Mhus	Γ	3	•	T^-		× 1 ×		OR.	** .	
₹	FIRST PRESEN	TATION C	FMATER	E DEPEND	en a	AM (37.0)	7014	uan .						
7	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLADM (37 OFR 1. M(d))									TOTAL		OR	TOTAL	
11.5										ADDILFEE		OR	ADO'L FEE	
_			ADUS			Column 2)	(Co	tumn 3)						
	1111	REM	ANNS	l	N	UMBER		ESENT	ı	RATE	ADOS-	İ	RATE	ADDI
Ξ	BYMISS	AMEN	TER	l		WOUSLY SD FOR	E	XTRA	П		TICHAL FEE			TIONAL
ENDMENT	Total (DF CFR 1.10(c))	1.7	7	Minus	-	W	•	7		×1 ·	1	OR	x s	722
Z	Independent OF CFR 1,160-0	1	7	Minus	-	3	•	/			-/			
¥	COST COSCS	E DEPENDENT QUAIN (37 CFR 1,16(4))					X5	-/-	OR	X 5				
_					- C	(310)	1,10	ell	ļ	TOTAL	-	OR	TOTAL	
												OR	ADD'L FEE	<u> </u>
_			men 1)			ONEST	(Co	uma 3)						
AMENDMENT C	gld05	REM	ADING TER DMENT		PRE	MBER VIOUSLY ID FOR		SENT	ı	RATE	ADDI- TIONAL FEE		RATE	ADD+ TIONAL FEE
죎	Total cor cor t. sign		9	Minus	-	20	•	$T \neg$	ı	× 5.	7	OR	x 5	
ä	(D) CSR 1,1600			Mhus	1	3	• 7		ı		\dashv			
Š	PIRST PRESENTATION OF MATURE DEPENDENT CLAIM (17 CFR 1.18(4))										-	OR OR	**	
TOTAL ADDLESS													TOTAL ADDL FEE	
:	If the entry in co	dymn 1 i	s less than	the entry	in coh	van 2, write	Tin	column :			/──	OR	worke [
	if the "Highest I if the "Highest I	tumber P	'reviously	Paid For	DI THE	S SPACE I	tess !	han A ar	her "	3 *.	,			
	The 'Highest M.	unbar Pr	evicente P	and For fi	Intel or	Indensade	off) in I	he hinks		tobar forms to the				

The eduction of internation is recovered by 37 CFR 1.10. The information report informs (specific door in column 1, ordinary 1